

Article - Health Occupations

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§1-212.

(a) Each health occupations board authorized to issue a license or certificate under this article shall adopt regulations that:

(1) Prohibit sexual misconduct; and

(2) Provide for the discipline of a licensee or certificate holder found to be guilty of sexual misconduct.

(b) For the purposes of the regulations adopted in accordance with subsection (a) of this section, “sexual misconduct” shall be construed to include, at a minimum, behavior where a health care provider:

(1) Has engaged in sexual behavior with a client or patient in the context of a professional evaluation, treatment, procedure, or other service to the client or patient, regardless of the setting in which professional service is provided;

(2) Has engaged in sexual behavior with a client or patient under the pretense of diagnostic or therapeutic intent or benefit; or

(3) Has engaged in any sexual behavior that would be considered unethical or unprofessional according to the code of ethics, professional standards of conduct, or regulations of the appropriate health occupations board under this article.

(c) Subject to the provisions of the law governing contested cases, if an applicant, licensee, or certificate holder violates a regulation adopted under subsection (a) of this section a board may:

(1) Deny a license or certificate to the applicant;

(2) Reprimand the licensee or certificate holder;

(3) Place the licensee or certificate holder on probation; or

(4) Suspend or revoke the license or certificate.

(d) This section does not negate any other disciplinary action under a health occupations board’s statutory or regulatory provisions.

(e) (1) (i) Each year, each health occupations board shall submit a statistical report to the Secretary, indicating:

1. The number of complaints of sexual misconduct received;

2. The number of licensees, certificate holders, and complainants involved in the complaints of sexual misconduct listed separately by category;

3. The number of complaints of sexual misconduct still under investigation;

4. The number of complaints of sexual misconduct that were closed with no disciplinary action;

5. The number of complaints of sexual misconduct that resulted in informal or nonpublic action;

6. The number of complaints of sexual misconduct that were referred to the Office of the Attorney General for prosecutorial action;

7. The number of complaints of sexual misconduct that resulted in each of the following:

A. License revocation;

B. Suspension;

C. Probation;

D. Reprimand; and

E. Denial of licensure;

8. The number of complaints of sexual misconduct that were forwarded to law enforcement for possible criminal prosecution; and

9. For any other actions taken regarding complaints of sexual misconduct, a detailed breakdown of the types of actions taken.

(ii) The report shall cover the period beginning October 1 and ending the following September 30 and shall be submitted by the board not later than the November 15 following the reporting period.

(2) The Secretary shall compile the information received from the health occupations boards and submit an annual report to the General Assembly, in accordance with § 2-1257 of the State Government Article, not later than December 31 of each year.

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